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ABSTRACT

This forum discusses the importance of safeguarding the wellbeing of older children enmeshed in Minnesota's child welfare system, emphasizing the need for permanency and acknowledging of the ascendancy of the court system. Section one presents basic data on Minnesota adolescents in out-of-home care, noting the high proportion of minorities. Section two includes presentations that examine groups of adolescents of major concern due to gaps in social services or inattention to their needs. Section three presents findings from outcome research on adolescents experiencing placement. Section four discusses the politics of this issue and recommends that groups pull together to find a solution. The forum concludes that the focus on problems in the child welfare system has led to a sense that the current system is a failure, noting that the negative political aura surrounding the child welfare system is reinforced by the ideological stance of many political figures that adolescent problems are the responsibility of the family, not the government. It discusses societal and political indifference to the plight of teens in general, particularly homeless, runaway, maltreated teens, noting that some people believe that underlying these policy concerns, serious practice issues confront county front-line workers dealing with adolescents. An appendix includes a Powerpoint presentation on Minnesota adolescents in out-of-home care. (SM)

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Debating the Options for Adolescents at Risk:

Can We Safeguard the Interests of Endangered Adolescents?

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CASCW Center for Advanced Studies in Child Welfare

Highlights from the forum held on
Wednesday, December 5, 2001

edited by Esther Wattenberg

UNIVERSITY OF MINNESOTA

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Debating the Options for Adolescents at Risk:

Can We Safeguard the Interests of Endangered Adolescents?

Highlights from the Forum
Held December 5, 2001

Edited by
Esther Wattenberg

Center for Advanced Studies in Child Welfare
School of Social Work
Center for Urban and Regional Affairs
University of Minnesota

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Introduction

Esther Wattenberg, Center for Advanced Studies in Child Welfare

This forum, "Debating the Options for Adolescents at Risk," opens up a central question for safeguarding the well-being of older children enmeshed in a child welfare system. What should a community provide for older children who cannot live at home? We shall see whether this forum can provide answers to this persistent question.

The context for this forum rests on two major concepts: one is permanency. It is the policy of this state, and indeed of the federal government, that every child, when removed from biological parents, is entitled to a foster family, chosen first among relatives or important friends known to the child, then from carefully selected non-family foster homes, and then to other group options, depending on the needs of the child. Out-of-home placement shall be considered a brief and temporary episode. Practice derives its legitimacy from this policy. The second major concept rests on the acknowledgment of the ascendancy of the court system. Decisions are not, primarily, in the hands of social service personnel in county systems. Decisions are ultimately in the hands of the court. The extent to which the court system is shaped by the permanency concept is not entirely clear. There are regulatory features which will guide placement and the timetable to achieve stability and permanency. We are now entering terrain that is highly regulated by federal and state statutes.

Adolescents represent a major challenge to the child protection system. An increasingly large proportion of children in care are adolescents with troubled histories of disrupted foster care, homelessness, and running, and an intense need for mental health services. Permanency options for older adolescents compromised by poor educational preparation are under scrutiny. It is against this background that we open the forum for reflection and discussion.

PART ONE: Background

A Presentation on Basic Data on Minnesota Adolescents in Out-of-Home Care

[See Appendix A for the full Powerpoint Presentation]

Esther Wattenberg and Jennifer Menke, LSW, MSW, MPP candidate

This is somewhat a "forced march" through some basic data.

We will first take a look at what this state has done for the housing issue for adolescents. On any given night 660 youngsters are without a place to stay. They are without a home address. Two-thirds of homeless youth have experienced some kind of placement, 47% have been physically abused, and more than one-half are persons of color, with African American and Indian youngsters over represented.

The shelter system has 60 beds that the state has provided. There are three shelters in the metro area. Now we have a coalition of 25 agencies that also provide shelter. This gives us our first indication that many of the services for this adolescent population are privatized. That is not clearly understood. They are privatized in the sense that they are administered by non-profits, but exist financially with a contract negotiated with the county for public funding. Transitional housing serves five hundred youth with 20 programs. Homeless youth, runaways, and older youth in transitional housing represent an unstable population. An accurate count of "need" is difficult to ascertain.

Almost 19,000 children are in out-of-home care, and about half of them are the population that we are concerned with this afternoon. Once again, children of color are over-represented. There is an urban/rural split. I asked Bob DeNardo if "state guardianship" was the new language for wards. He said, "Ah, yes indeed." We have children without parents. We are their parents. You and I, representing the state, are now parents of these children because their biological parents have had their rights terminated. This should be a group that we are especially concerned with. There are 585 wards of the state between the ages of 12 and 17. Only eight percent are in adoptive placement. The largest number of adolescents are in long-term foster care, the least desirable option for the permanency goal. While we do not have a complete profile of adolescents in long-term foster care, we did find that almost half had a disability, and many were assessed to be severely

emotionally disturbed. A comprehensive pattern of use of social services by adolescents was not available.

Chafee funds for independent living are used to some extent. In Hennepin County, 70% of these youth are children of color; statewide, 29%. There is a serious gap in the provision of mental health services. More than 27,000 were assessed as severely emotionally disturbed, but less than half received mental health services. Day treatment, outpatient treatment, and residential treatment centers are where you see these numbers. The financial data of course always astonishes us. Who bears the disproportionate share of the cost of mental health services? Of the $144,700,000 spent on mental health services, the local share (the county share) bears the largest burden, 40%. We are one of the few states that imposes such a highly disproportionate burden on local counties, which are constrained by limits on their property tax levies.

Where are the gaps? Public social services have responded to some extent to this population. It would be inaccurate to say this population has been totally neglected. Whether we have responded sufficiently and with the right kind of services is a central question. Anecdotally, we keep hearing that some counties are refusing to respond to requests for mental health services for adolescents. We don't have a really accurate picture of that. We only have data on need and budgeting constraints. A study to articulate the availability of mental health services for adolescents in the child welfare system is not available.

There are two overlapping populations we did not include for discussion in this forum: adolescent parents and older children in the corrections system. These two groups deserve attention, but their needs are met in systems other than child protection.

PART TWO: Panel Presentations

Note: Because of the delay in arrival of Michael Little and Selma Danskoho (airline difficulties), the panel opened the forum with the following presentations.

Responses to the Question: What group of adolescents concerns you, either because there may be gaps in the social service system or because of inattention to their needs?

David Sanders, Director, Hennepin County Children, Family and Adult Services
Gail Chang Bohr, Executive Director, Children's Law Center of Minnesota
Richard Wayman, Collaborative Director, StreetWorks

Wattenberg
David Sanders is the director of Children, Family and Adult Services in one of the largest urban counties in the country.

David Sanders
In response to the question . . . in Hennepin County, we have about 2,100 to 2,200 children in foster care on any given day. We have done a lot of work, and actually some of the people who have done a lot of that work are in the audience . . . The foster care system is not working for the group of kids that are in repeated moves in what we call "placement disruption." There is no stability in the homes we have available for them, and we estimate in any given year that the population is around 80 children. There are a variety of characteristics that are associated with this group of children . . . I think most of the people in the room would be aware of them. These are kids with behavioral difficulties. They have been in and out of foster care—probably victims of severe abuse or neglect. That is the population that I am most concerned about on any given day. We have an extensive system that is designed to provide both safety and stability for children, but I would argue these are children we are failing quite seriously.

These are children that our system has determined cannot be raised by their parents. Either there has been a termination of parental rights, or some other permanency options have been ordered for them. In fact, the response by the child welfare system is less than adequate. At this point, it doesn't appear that we have options for these kids. We have talked about residential academies as an option or other options . . . but as a system, we need to be focused on this group of kids. . . . I direct the Children and Adult Services for

Hennepin County. We are a large county, have a large budget, a large number of staff and so forth. We have a lot of responsibilities for social services, and I certainly have a lot of interaction with elected officials about a variety of issues related to funding for social services and regarding policy directions. This debate around adolescents at risk, I think, is a very interesting one. Most of the debate, at least in our discussions to this point, has focused on child welfare and the child protection system as being a major player in addressing the needs of adolescents at risk. I would say, as I look at elected officials really struggling with budgets and with prioritizing resources, there may be a gap between the belief of many in this room that this is a responsibility of the child welfare or child protection system, and the belief of elected officials who don't necessarily see the solution of adolescents at risk as resting within the child protection system. If we look at resource allocation, it is a much safer assumption to say that many elected officials believe it rests in education or in corrections. . . . Further, much of the rhetoric suggests that it is a family responsibility . . . So I think, as we talk about this issue, if we are serious about improving what happens in either child protection or child welfare as it relates to adolescents at risk, we have to close that gap. If we believe that is where the solutions lie, we need to do a much better job of convincing the public. If attention to the population of kids that I see as the highest priority received the level of priority in public policy that they should, we wouldn't be having this discussion right now. If we fail to convince the public, we'll have the discussion again in five years and in ten years and in fifteen years, because it's the same discussion we've been having the last ten to fifteen years. So I think this aspect of the public policy debate—how we look at where politicians, elected officials, and the public believe the solutions are—is where we need to put a lot of energy.

. . . as I look at elected officials really struggling with budgets and with prioritizing resources, there may be a gap between the belief . . . that this is a responsibility of the child welfare or child protection system, and the belief of elected officials who don't necessarily see the solution of adolescents at risk as resting within the child protection system. . . . many elected officials believe it rests in education or in corrections. . . . Further, much of the rhetoric suggests that it is a family responsibility . . . as we talk about this issue, . . . we have to close that gap. . . . we need to do a much better job of convincing the public. . . . this aspect of the public policy debate—how we look at where politicians, elected officials, and the public believe the solutions are—is where we need to put a lot of energy.

Wattenberg

Certainly, that is an important aspect of the debate. Who is responsible for paying attention to adolescents at risk? Is it the family, public institutions such as education and corrections, or is it the child protection system?

Who is responsible for paying attention to adolescents at risk? Is it the family, public institutions such as education and corrections, or is it the child protection system?

Could you say more about the 80-90 youngsters for whom the system is having problems finding stable placements? Do you know something of their profile?

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Sanders

. . . there is an age range, generally from 10-17. The peak years are going to be 13 and 14. As I said, they are often kids with multiple behavioral issues or at least those are issues that have been manifest over time. They have spent time in residential treatment, certainly have spent time in and out of St. Joseph's Home for Children in Hennepin County, this is shelter placement. They are on the periphery of the correction system. Often times, they may be in and out of the correction system. And a large percentage of them have been ordered into long term foster care. The information we have suggests that long-term foster care, as a permanency option, is really not a very good option.

Wattenberg

Gail Chang Bohr is the executive director of the Children's Law Center. This is a recently developed option in our community for responding, in legal terms, to the interests of youngsters who are in out of home care. They come to the attention of the Children's Law Center in a number of ways: through the court system and some are self-referred.

Gail Chang Bohr

I came across a quote that former Minnesota Supreme Court Justice Sandra Gardebring made at the fourth anniversary of the Children's Law Center of Minnesota. . . . For some reason I still think of adolescents on that continuum of childhood. They're not yet adults. But here is what was said, "I think it is fair to say that Americans hold an ambivalent feeling about children. On the one hand we continue to idealize childhood as a time of innocence just as our Victorian ancestors did 150 years ago. But on the other hand we tolerate a continuation of certain conditions, and by doing so, belie the deep concern we express toward children." And David, I'm really deeply interested to hear that our job is really to make sure that the public officials understand that we in this room see adolescence as a part of childhood on that road to adulthood. So who are the adolescents we are most concerned about at Children's Law Center? This is based on the experience that we've had. We at Children's Law Center of Minnesota have two programs where we represent children 12 and over who are in the foster care program. So the children we are most in contact with are the children who have been removed from their homes, because of abuse or neglect, and they are in foster care—some of them for the first time. Others have been in the system for years. We are appointed by the Court to bring children's voices to the proceedings. That is, we talk with the children and get to know what their wishes are. So it is their firsthand words that are going to be brought to the

court. They're not going to be filtered through the guardian ad litem or the social worker or somebody else. This is what the children are saying, and this is what we feel is important for the court to know.

The children that we represent, as I say, are 12 and over. We do have some who are younger but that is the main population that we represent. Most of these children are in the metro area. Some of the children we represent are state wards—sometimes known as children under state guardianship—they live in greater Minnesota on Indian reservations. So we do have that perspective, as well. Based on the experience of the Children's Law Center of Minnesota, I think it is fair to say that we are concerned with the following three types of adolescents: The first is that set of youth who are aging out of the system, with no place to go after they leave foster care. I think the statistic is that there are 500 Minnesota youth who age out of the system upon turning age 18. There are a number of things that are in the works for these children. The Chafee Bill is federal legislation that defines the kind of services that counties should be providing for these youngsters. We have it in state legislation, right now, that by the age of 16 there should be an independent living plan that is worked out with the young person and then begun to be implemented by social workers. So that's a piece that is in law right now. The policymakers have said that this is an important piece and that we can't take children away from family and not somehow provide for them ways to learn how to be independent and productive adults. . . .

Based on the experience of the Children's Law Center of Minnesota, I think it is fair to say that we are concerned with the following three types of adolescents: The first is that set of youth who are aging out of the system, with no place to go after they leave foster care.

The second set of kids that we are concerned about . . . are young adolescents, age 12-14. They seem to be on the cusp of puberty. But these are the young people who are disrupting out of foster care. We have seen over and over where a young person would have spent the last eight years with the same family, and when they reach 13 and 14, all hell breaks loose. And that family says, 'I don't want you anymore. I can't handle this.' And for whatever reason, that placement disrupts. It happens probably with more frequency in terms of a pattern of a long time placement with the same family. Once that happens, it seems the child is really set on a path for destruction and a downward spiral. It is a very stormy time in terms of the development of young people in this society. It doesn't necessarily translate to how we support the foster parents to help those young people to remain engaged and connected to that family. That is an area that we are very concerned about. I want to give you a quote that came out of a California focus group of adolescent foster youth in

The second set of kids that we are concerned about . . . are young adolescents, age 12-14.

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1999: "We need foster parents who will stick it out with us and care for us a long time." I don't think that's anything more than any child would ask of their parents. And I think that it's something for us to be thinking about.

How do we support foster families, so the foster parents will be there for those young people. From the perspective of the foster parents (according to a study from Washington State) what they would like to have is the support of the professionals to help them to remain engaged with these young people. So it has been asked for from both ends.

The third set of kids that we are concerned about . . are the kids that we call the dual systems youth—the dual systems being the system of dependency (foster care, children from child abuse and neglect); and the other system being corrections (delinquency).

The third set of kids that we are concerned about . . are the kids that we call the dual systems youth—the dual systems being the system of dependency (foster care, children from child abuse and neglect); and the other system being corrections (delinquency). Many of these young people start out in the system as children who have been removed from their homes, not because of something they did—which is something we always have to remind ourselves . . . Their families were not able to care for them, but now they are in the system. For many of them, they end up committing misdemeanors and running away, which throws them into the delinquency side of the system, and they end up in juvenile detention, and possibly probation violations . . . It's very easy, at that point, for the child welfare side of things to wash their hands of these young people and to say probation and delinquency will take care of you, when, in fact, it's not the kind of caring you would want for your own child, let alone for this youngster who has been brought into the system . . . But we see this happening over and over. Although it is not an area we (CLC) usually are involved in. . . . The flip side of that—and this comes from public defenders calling and asking what to do about a child—is when these young people are in delinquency and they don't have parents. If you don't have a parent, you really don't belong in delinquency, it seems to me. We're talking about young people 13 and 14. There should be the child welfare side that steps in and says, 'Okay, this really is what needs to happen for this young person.' But once they stay on the probation side of things and the delinquency side of things, it's very hard to know how they will actually find their way back out of that quagmire and into some kind of planning for their future, including the use of cell phones and the use of all that Chafee money that we're talking about for independent living.

Wattenberg

Richard Wayman is the executive director of the private, non-profit consortium of agencies that has been attentive to this population in various ways.

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He directs StreetWorks, which in and of itself has an interesting connotation. What groups are you most concerned about in this adolescent population that comes to your attention?

Wayman

I am with StreetWorks, and I'm here to give the view from the streets. StreetWorks is a collaborative of twelve youth serving agencies that provide street-based outreach to homeless and runaway youth in the Twin Cities metropolitan area. And just so you know, I'm kind of the paper pusher. When I first came to the collaborative I wanted to go out and feel what it was like to do street based outreach. So I went out one night and hung out at a café with two of my outreach workers named Kate and Mike. Kate has green hair by the way. We were hanging out, having a good time, but it seemed kind of slow, and I was just kind of talking with them and no one was coming up to us. And so after about a half hour, Mike came over to me, after talking to some youth, and he says, "Rich, you got to leave." And I said "Why?" And he said, "Because they think you're a cop." (laughter) So at that point in time, I realized that my job was better in the office. But I work with a really fabulous set of agencies—twelve in total here in the metropolitan area. And we have a team of 30 outreach workers, and we're on the streets everyday from about two in the afternoon until twelve midnight. We see the kids that I term as the throwaway kids— those kids that have either never made it into this child welfare system or those kids that were in the system and then the system failed them at some point in time. As a group of safe adults, our goal is to build trusting relationships with youth on the streets because the youth that we work with come from traumatic histories of abuse and neglect. They're very distrustful of any kind of adult system, having gone through that process.

Just so you know of some background numbers, in 2000 alone, my team of 30 outreach workers saw over 27,000 youth on the streets of the Twin Cities. Of those, 16,000 were new youth contacts, because our teams go into particular neighborhoods where they're connected, and they know the people in those neighborhoods. When they see a group of youth, they know who they've seen before and who are new kids on the streets. And of those 16,000, nearly 500 were able to access intensive supportive services—things like emergency shelter, transitional housing, case management services, and educational employment opportunities. In 2001—I looked at our database just this morning—between January and October of 2001, we've provided intensive services, now, to over 700 youth. We're finding that the problem isn't going away, and in fact, it keeps getting worse.

The problem for us is that the alternatives are limited. In the metropolitan area alone, there are only 72 shelter bed spaces that are accessible to youth for emergency shelter purposes. We're helping 700, but there are only 70 bed spaces for each shelter. Alternatively, there are only 80 transitional housing program spaces—apartments that are subsidized for youth to live independently with the help of a case manager—and we're losing some of those spaces. We just lost 12 apartments in the latest HUD funding round this year in 2001.

Our basic problem is that we have tried to help youth, but we have two systemic barriers. One, we find that county social services do not provide adequate support or services for older adolescents. Support and resources are also lacking in the private, nonprofit market. So we end up engaging in what we call "harm reduction." Sometimes there are not good alternatives. All the shelter bed spaces are filled and the county isn't going to help you, so we do things like finding really insulated sleeping bags so they can at least stay warm for a couple of nights until we find an alternative for them.

A lot of the youth we see are between the ages of 12 and 21, so my definition of youth kind of tips into the legal definition of adulthood. In fact, a lot of the youth we see are between the ages of 16 and 19. That age group is one we are very concerned about. There are some things that we have found, though, that are pretty disturbing. This is the stuff that keeps me awake at night. . . . there are some kids in really vulnerable places. As an example, we haven't really addressed teen parents. In 2000 alone, we saw a 500% increase in the number of teen parents on the streets in the Twin Cities. This summer one of our outreach workers found a young girl who was age 18, eight months pregnant, sleeping on a homemade raft in the Mississippi River. She was not receiving prenatal care, and she was sleeping on the river because she could not afford rent with her part time job. She was afraid if she slept on the streets, she would either be attacked or beaten by the police. We see some really terrible situations.

The thing that got me involved in this debate about out-of-home placements for kids is the realization that a lot of our youth that we see on the streets come from previous histories of out-of-home placements. Every three years the Wilder Research Center does a statewide survey of homeless youth in the state of Minnesota. Starting in 1994, they started tracking unaccompanied homeless youth. These are youth that are not a part of a family in a shelter. These are youth that are on their own. In 1994, 1997, and again in 2000, we have consistent data that seems to indicate that a vast majority of kids that are out on the streets have had previous out-of-home placements. In 2000, 67% of all homeless youth report receiving county services and previous out-of-home placements, but still ended up homeless and on the streets before their 18th birthday. Of those, 46%, nearly half, had had

previous placements in juvenile detention centers. Forty-one percent had had previous placements in foster care, and 13% had placements in drug or alcohol treatment facilities.

Now, as a youth advocate, I know that the policy of the state is that we're supposed to work toward the best interest of youth. And so my question, as a homeless youth advocate, is why is this happening? Why are we finding youth on the street that, at some point in time, were taken out of their family, placed in an out-of-home placement and ended up on the streets before their 18th birthday? That's what drives me crazy.

The other things that I just want to highlight that we've been able to look at in our collaborative is that African American and Native American youth are disproportionately represented in out of home placements. Yet, facilities are not required by the Department of Human Services to speak to their ability to meet the cultural needs of youth served by the agencies, or the agencies' own cultural competency. Another thing that's very disturbing is the conclusion of the auditor's report[1] noting that, among counties in which minority groups comprised at least 5% of the population, more than one-third of human services directors, the directors, and the correctional supervisors, said that residential facilities are often insensitive to cultural and ethnic differences in the children they serve. That's disturbing.

Correctional and human service officials raise concerns regarding the lack of short-term placement options (those options that are three months in duration), in order to provide some respite relief.

In all categories of facilities, county correction staff reported the need for improved aftercare services, following residential placement. In other words, the legislative auditor decided that maybe we're not doing a very good job in providing aftercare support.

The auditor also found, in 1999, that half of all county correction supervisors and human service directors reported that budget considerations had limited their ability to provide care and services for all children in need. Further, in 1997, 42% of human service directors said that budget considerations had caused them to limit the number of child protective cases recommended for out-of-home placements. So it was budget considerations alone that caused them not to be placed out of home.

The last thing I want to note is a trend that we see, both in the metropolitan area and the rural areas of the state, and that is simply the lack of accessibility to child protective services for older adolescents in the system. In Hennepin and Ramsey Counties, where we do most of our work, there seems to be an unwritten policy that any youth over the age of 14 years who calls child protective services and reports that they are being either physically

[1] "Juvenile Out-of-Home Placement," a Program Evaluation Summary, Report #99-02a, Office of the Legislative Auditor, January 1999.

or sexually abused, is not deemed to be in imminent harm. No case is opened, no investigation is done, and they are simply told to run to the nearest youth shelter. I'm told that again and again by youth advocates and case managers in the youth service agencies that I work with. Even though we, as youth workers, are mandated reporters of child abuse, it becomes a joke to report, when we are told we don't have the budget to serve older adolescents. So we use the funds to serve those who are most vulnerable—the infants and the 0-5 year range. It's a reasonable policy. If you don't have enough income or revenue to serve everybody, you're going to go to the most vulnerable population. The result of that, however, is that older adolescents are dropped out of the system. We noted, on one of the slides, that there were 5,686 investigations, but my problem is that the youth we try to refer are never even given that investigation. They are simply referred to a youth agency or shelter, and I find that to be despicable. That's what keeps me up at night.

If you ask me what I'm most concerned about, there are four major things. One is the older, unaccompanied youth that have no access to the system—those who experience systemic barriers. I'm also concerned about those youth who are aging out or exiting residential placements and are not given proper aftercare planning. They are sent back to threatening or vulnerable situations, and there's no follow through for them. I'm also concerned about those youth—I'm really aware of this—who don't want to be in the system. We work with 16 and 17 year olds who have either been in the system or have never been in the system, but it's not a place they want to be. And so the question is, what do we do with those youth? What alternatives exist, because there are alternatives . . .

The other major population that I'm concerned about are the younger teens, those 12-14, who may be having severe family conflicts, but are unable to find proper family reunification services. Only a few programs in the whole metropolitan area provide family reunification counseling—the Bridge for Runaway Youth and a YMCA program in northwest Hennepin County. It's hard to find these types of services for the 12-14 age ranges, and yet they may not need child protective services, if given the proper services, whether from private agencies or from county services. . . .

The other major population that I'm concerned about are the younger teens, those 12-14, who may be having severe family conflicts, but are unable to find proper family reunification services.

As we enter into this new era of looking at large residential institutions for youth, I'm a big advocate for giving choices to youth—giving choices to them to be able to look at their own self-determination and where they are heading, and allow them to say, "I want to be adopted," or "I want to go

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into foster care," or "I want my own apartment that's subsidized," or "I may want to be in a residential academy." Let's try to look at those options. In looking at the options, we're entering into a phase that we haven't entered into for several decades. My question is, 'When we design new programs and facilities, how will we best protect the best interest of the children?' Are we looking after their physical and emotional well being? How do we best design programs that best fit their needs? . . .

Wattenberg

Each of the panelists has identified the groups of vulnerable adolescents they are most concerned about. We are open for discussion or comment.

Audience Comment—Suzanne Guttsen, Program Consultant

I am Suzanne Guttsen, and I work for the Minnesota Department of Human Services. I would just like to add something to Rich's comments. Last summer, in the process of developing a state report on homeless and runaway youth[1], we conducted structured interviews with young people at drop-in and shelter sites. We asked them first about their experiences. Nearly all of them had run away from home the first time when they were 13. Some of them had run as many as 20 times. Then they told us why they ran away, and we asked them: "Did you receive services?" "Did your family receive services?" "Do you think it would have helped if your family had received services?" Almost all of them were pretty negative about that. They didn't think services to their families would have helped. About 40% of them said that unless their parent or parents went "into CD treatment," the other services would not help. Then, towards the end, I asked them, "Do you think it is important for children to stay close to their families, homes and community?" Every one of them said "Yes." Every one of them. So in terms of listening to the kids, they want to stay home. And yet when we look at our statistics, we do not have adequate reunification services or follow-up for families in crisis. Nor do we have the kind of counseling we need. We do not have comprehensive family reunification programs in the shelter systems because there just isn't enough funding. Most youth-serving agencies are getting by on a shoestring. I think we're leaving out a really important part of what we need to be building on.

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[1] "Report and Recommendations for Homeless and Runaway Youth." Minnesota Department of Human Services, Family and Children's Services, April 2002.

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Wattenberg

There is an interesting observation here. These youngsters did not feel services would help their families. Have we failed to offer support to families, or is it that we don't know how to solve the parent/child conflicts which appear to be embedded in American culture during the adolescent phase; or do we have a situation in which they are not safe in their family settings?

Sanders

Actually, there is a point I want to make that I think is important to keep in mind, as we have this discussion. There is a tendency to identify a population that, in a variety of ways, the system hasn't worked for, and then to define the system based on that particular population. I would argue, in fact, it should be the other way around—that we need to look at where many of the successes are. And I would argue that there are many successes in not only the foster care system and the child protection system, but in a variety of the early services that are provided to families. I think that if we look at any of the populations that we've talked about, there are many families that get involved, receive services, and we never see them again. The family seems to be functioning well, and things go forward. But there is a group for whom our services don't work well.

...there are many families that get involved, receive services, and we never see them again. The family seems to be functioning well, and things go forward. But there is a group for whom our services don't work well. ...because of a variety of both public policy and resource issues. We need to be looking at these issues.

I think that one of the challenges that we have is where the issues of public policy and resources come into play. The flexibility and variety of services and options Richard talked about are often lacking because the services tend to be focused on the largest populations that are out there. I think that it is important to keep in mind that most kids do well, and that there is no need, generally, for children to either remain in foster care for any length of time or for a family to remain in the system for any length of time. There is a population that we are not serving well, because of a variety of both public policy and resource issues. We need to be looking at these issues.

Wayman

If I could just add something. Going back to what David said earlier, I think there is a disconnect between what I may perceive to be the role of the child welfare system and how the County Board of Commissioners may view their role with budget considerations. I believe there is a disconnect there. One of the basic points I want to make is that there simply is a real lack of resources in this area that is coming from the county. As was shown in the slide, the county, unfortunately, bears the brunt of the weight, as far as the

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cost in this particular area, and they don't want to increase that part of their budget. My viewpoint is that in both Hennepin and Ramsey counties, there is a lack of resources for family reunification counseling. Of course the kids think that services aren't going to help, because they think all adults are wacko. Right? So they're just not going to go there. But the reality is that when you look at the family reunification programs that exist—the few that are out there—they're successful. And they do reunify, and they do prevent out-of-home placement. The fact is we're not funding them to the level that we should or we could. We need to talk to our elected officials and say this is a high priority, and this will actually help you reduce costs in the long term, because if you get it at an earlier stage, it's less expensive to do family reunification than it is to spend a day in out-of-home placement in a correctional facility. So that's my point.

Sanders

I could make one quick point, supporting one thing that was just said. I think it's important to keep in mind, as we're having the discussion—and I will firmly put on my hat as a county director—Minnesota, as a state, puts a lower proportion into the child welfare system than any other state. This is a locally funded system. And one of the results of a locally funded system is that you have variances among counties, in terms of how services are delivered. And you have what ultimately is a limited tax base. It is property taxes that support this system. And there are multiple decisions made, on a county level as well as a state level, as far as where resources are to go. One is, as many of you know, there is a two billion-dollar state deficit. Maybe I am not the most optimistic person in the world, but I can tell you that this will not be the population that is seen as the highest priority in terms of funding with a two billion-dollar state deficit. It's not going to happen. Many of the pressures to counties will increase, as a result of this deficit. The population we are talking about is, right now, on the lower end of the priority level and is going to get lower. I think that as we are having this debate, it is critical to keep in mind how the funding works, and what some of the impacts are. So I want to echo some of what Rich said.

Audience Response—Pat Rentz, Social Worker, Nicollet County Social Services

> *I work in Nicollet County, primarily with adolescents. Working with adolescents and their problems is multifaceted. When they are 13 to 14, there is a critical point: whether they are going to stay in the system or get out. When Suzanne says they don't want to have anything to do with the services, or they don't want involvement,*

we get that from the parent, too. So when you try to do early intervention work, we don't find any takers until it becomes too problematic. Has anyone done any research on whether or not counties should be more proactive, filing more runaway petitions instead of doing diversion . . . getting right into court . . . or keep going on this preventative voluntary route? So, has any research been done in that area? Are there any findings in that area?

Wattenberg

Our Center has not researched the question of early court intervention. The study that Suzanne Guttsen referred to on homeless and runaways is the only known Minnesota study, I believe. Are there any responses from the audience on this question? We should put it on the research agenda. The issue of mandatory versus voluntary services is an issue that is raised throughout the child welfare system.

Gail Chang Bohr

I think one of the areas that we haven't actually looked at—but I know there are people in this room who have—when can you help a young person to live on their own independently? For some young people, that is a solution until they're ready to use services. Starting where that person is sometimes is the hardest thing to do when you're worried about their safety. But sometimes, if there is a place that young person can go—where they do have some way of being more independent—that can begin a process where they can get to that point of wanting to talk to parents. And maybe not, but I think that should be put into the mix of how you keep a young person safe and also able to live on their own if that is indeed a choice.

Audience Response—Catherine Kelley, LICSW, Program Director, The Bridge for Runaway Youth

My name is Catherine Kelly. I work at the Bridge for Runaway Youth. We have done family reunification out of our emergency shelter services for 31 years now. Even in our recent transitional living programs, in the last four years, we still focus on family reunification as a value. In my 25 years of social work, I have primarily worked with adolescents and families. I think it's really important that we remember that even if we're helping kids become independent and safe, everybody needs connection. And the way that kids and we, as adults, thrive is that we are connected to some sort of relationship. So I think that it's really important that no matter what program we are providing, whether it's foster care or emergency shelter or

street counseling or child protection services, we're helping these young people understand that they can create some sort of connection within a family system. Yet, after 25 years of social work in the Twin Cities, I believe, for the first time in my career, that I'm focusing on public policy as a very important issue. I think we need the public policy to support the values that we're trying to uphold for these kids. If public policy is not there, then, of course, we don't get the funds to help these families who want to be together. There are families who are fraught with some real basic needs and concerns. We have many families that are financially disabled, who have problems with housing, and who have problems with mental health issues. If we don't have the money and the services to offer them help for basic needs, then they can't be the family for that kid. Everybody in this room knows this. I'm just stating it out loud, so I keep going on the path. But I think we need to do more legislatively, also, to get the backing behind what we all believe has to happen.

Audience Response—Mary Ford, North American Council on Adoptable Children

My name is Mary Ford, and I'm from the North American Council on Adoptable Children. First, I want to do one brief advertisement, and then I want to ask a question. Contrary to popular belief, older children are adoptable, and there are several payoffs that people may get if they adopt older children. The first one is that you don't have to pay for daycare—hopefully. The second one is that you have a shorter wait for children. When you adopt a child age 15, "thank you" will come at age 18, or it will come at age 20. So you have a shorter time to wait for that thank you.

Now I'd like to ask a question. David Sanders, I know that in several large metro counties, some foster care programs and some foster care parents are being allowed to access residential treatment in a more streamlined way. And I believe it's shorter-term residential treatment. One of the advantages that I've heard from this kind of approach is that you then short-circuit the child's trip to emergency shelter care before that child is able to receive residential treatment. My question to you—and I want to say thank you to you for agreeing to be in the hot seat today—what are some of the barriers to expanding that kind of more streamlined approach? And also, from what I understand, these are very, very difficult children. These are children who are older, who have had multiple

placements, who have experienced incredible trauma, and thus have many mental health problems. What are the barriers to doing more of that streamlined approach?

Sanders

Thank you. Actually I don't know if I'm supposed to say this, at this point, but we have a proposal from a provider that would provide short term respite in a setting with a high level professional staff. It would be primarily for kids who are in either a pre-adoptive setting, long term foster care. I assume perhaps for adoptive homes, too. So that is something that we're looking at. I think that one of the challenges in setting up services for kids is that providers really go out on a limb, as far as setting something up, and then if there isn't the referral base, they struggle. So I think one of the issues is the potential pool of providers out there. But in terms of barriers, I actually think there are very few, other than is there a willingness to do this. Hopefully we'll have something up and running in the not too distant future.

Audience Response—Anne Polusny, Supervisor, Children and Family Services, Blue Earth County Human Services

My name is Anne Polusny, and I supervise Child and Family Services for Blue Earth County. We do a lot of this informally. Sometimes, living in small communities, you don't have some of the barriers of working for large government agencies. . . We often are very surprised by our foster parents who continually stick with a child, even though there may be a disruption. We ask them to hang in there while we do a short-term stabilization in a more restrictive setting, and we bring them into the process. We even encourage the family to work with the placement at that facility. We pay them for mileage and day care for other foster kids they may have in their home, so they can be a sort of parent and continue to be the contact for that child. I'm just amazed by the foster parents who are willing to hang in there with our kids. I think the reason they are willing to hang in there with the kids is because the agency is willing to remove and handle some of the troubling behaviors and follow through with the promise to do those things. We do that, often, with some pre-adoptive parents, too, who have some pretty troublesome kids and aren't quite sure if they want to adopt the child yet or not. We say, "We will help you. We will support you. We will continue to provide that case management service, which

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could include 'a,' 'b,' and 'c' for you." So it's something that we really want to try to continue, even on an informal basis. This is our point of view from Mankato and Blue Earth County.

Wattenberg

This is a response that exemplifies "best practices." Thank you for an excellent illustration of supportive services. We need to find or construct a "maturing vat"—some way in which we can provide respite to weary caregivers until the kids get through some of the terrible turbulence they are experiencing.

Why is it that we have such a difficult time placing the needs of these youngsters on the plate of the political agenda? Is it such an unlovable group?

Wayman

I belong to two statewide groups. One is called The Runaway and Homeless Youth Coalition. The other is called MARY's—Minnesota Association of Runaway Youth. One of the things that we are talking about is that there seems to be a lack of clear public policy around what to do with older adolescents in the state of Minnesota, because everything has been local for so long. Another difficulty is that we keep bouncing against the cultural problem of fear of teenagers. I actually think we have a dichotomy, and this partly goes back to Gail's quote—I think it is fair to say that Americans hold an ambivalent feeling about children. . . . I also think that racism plays into this. Stereotypes of youth of color or communities of color play into systemic barriers that are out there. So until we start to realize that youth are not something to be afraid of, but actually are more vulnerable than other populations in our communities, I don't think we'll get very far.

Sanders

I would add one more piece. I heard this actually years ago from a Republican lobbyist in Washington DC. If they were approached about an issue regarding seniors, it was going to be one of two issues. It was either Medicaid or Social Security. If they were approached about issues of youth, it could be any one of two hundred issues, and there really isn't clarity around an agenda for youth that is consistently presented. Newly elected officials on our county board realize that this issue is as confusing as you can get. They hear the litany of issues and their eyes glaze over. There is not the sense that this is something that is necessarily a part of what we want to do as government. It is seen as "Isn't this a family issue?" "Is this an issue that we are going to pour more money into, with very little result?" It is not an issue that most people are able to gravitate to immediately.

Gail Change Bohr

I think government reluctance to engage in adolescent issues probably also goes to what we consider to be an adult. I've heard the directive to young people that when they're 18 they can do "whatever." And we know that an 18-year-old is not in a position to do "whatever," because they're still under our care, they still need guidance, and they still need a lot of handholding. That ambivalence is still there. I think it's also the kind of mixed messages that we get from these young people, and that we in turn give them. It does create a sort of confusion for a person who's trying to help. As for policy-makers, I think they see it's easier if you say this is the cutoff age and that is it. That kind of message has gone down to the county worker level where kids, at a certain point, 18, are out, without the preparation that goes before that birthday. This is actually to confirm what David is saying in terms of a clear policy. But I think some of that comes from our own ambivalence, and some of it comes from the young people. I think we have to make a decision about what we think is important for a young person to have, to know, and to experience, for them to be independent and functioning in this society. Then go from there, regardless of what their age is.

Audience Response—Ranslow Zuber, LSW

I'm a licensed social worker. I think one of the good things about this conference is that it is putting into place a child welfare needs identification process. I think probably one of the reasons for public policy being confused is because we haven't been clear about the needs. And I think that if we had been clear about the needs, it would have been much easier to pull the information together that was needed for today's conference. When we're not clear about what the need is, it is certainly going to be difficult to tell politicians what they should be doing. It's going to be really easy for people in the community to dream up services for adorable 4 to 12-year-old children, such as orphanages—that aren't needed—if we're not clear about what is needed. So thank you for today, because I think this is a first step that really needs to be taken.

Audience Response—Sue Serbus, Social Service Supervisor, Children and Family Services, Nicollet County Social Services

I want to challenge some of the thinking that folks have with regard to working with children and families . . . in terms of our policy. We have moved toward what is now "child welfare targeted case management." Also, for children's mental health,

we have what is called Rule 79, "targeted case management." As a process, it is very individually focused. The focus is on the child in both of those cases. It has moved away from what I would consider a family centered, family preservation, and family support kind of approach.

That's one issue. So when we look at practice and we look at what workers are required to do—and I think for people working in public social services—we spend a lot of time and effort sitting at our computers . . . So there is less of an emphasis on the importance of how we are working with this family. . . .

I think the bottom line is that it's really hard doing multi-system family work. It is very tough because you have to be balanced. You have to do a lot of mediation—you know the whole concept of family group conferencing. Listening to issues and sides is hard, hard work. You know sometimes it doesn't always work. You have those few kids that end up in a long-term placement and end up hopping around. . . . When they age out of the program, you know where they go? They go home. . . . They find their family. I scratch my head and say why the hell did we work so hard at trying to find a permanent home? . . . We need ideas about short-term placements, respite care, 90 days or less placement, putting a lot of money in the front end. A few years ago we had a program. It was federally funded. It was EAIFPS. . . . Emergency Assistance Intensive Family Preservation Services. It was a waiver program that provided, regardless of income, 90 days of medical assistance, and this paid family preservation services. And let me tell you, that was great because you didn't have to sit there and think, well now, do we have a budget line for that? Or can we afford this? We had families use that service, and we got in there and provided that service. The family didn't have to be on medical assistance. It gave the family a shot in the arm. It really provided the service that they needed—front-end kind of work. These are just some of my thoughts.

Audience Response—Julie Russomanno, Staff Attorney, Children's Law Center

I'm from the Children's Law Center of Minnesota, and I just want to use two words that I've heard—engagement and empowerment. With these words, I want to let you know one of the things that we're working on at Children's Law Center of Minnesota concerning youth aging out of the system, and as well

as youth who are currently in the system. I'm working on a project to create a forum based on the California Youth Connection Model. I don't know if anyone here is familiar with this. Basically, it is a forum of youth, by youth, formed by youth, and run by youth. I'm trying to get one of these started here in Minnesota. So I welcome anyone wants to help in this endeavor or give me some leads. I know there are some key players in this room that could help me. The purpose of it would be to engage our political officials. The idea behind it would be to bring youth together and get them to testify in front of the legislature and really bring the issues to light. I don't think there's any better way to sell what we need to sell other than to hear the voices directly from the youth themselves. So with that said, if you have any insight or anything you want to help me out with on this matter, please contact me at the Children's Law Center . . .

Response from Audience [unidentified]

I think one of the voices that isn't in the room, but is being channeled through quite a few of the people here, is the voice of young people. Way to go, Julie. Do that. We need to be looking to young people to help us find the answer or some other options. I think we're stuck. We're not thinking very creatively about how to do this. I really do think that some young people could help us try some new and different things that none of us are thinking about.

Sanders

This is a comment on what it takes to convince public policy makers. What happened recently in Washington D.C. is instructive. The majority of people in the House and in the Senate get information about the child protection and child welfare system by reading the *Washington Post* and by reading about what happened in Washington D.C. A seven-month-old child starved to death. Opened on a child protection case, nobody had seen the child for seven months. And the worker said, "I have a caseload of 135. No way that I'm going to be able to see this child." The perception among policymakers is that this is a system that doesn't work. So, why put funding into a system that doesn't work, other than to do the very basics around safety and stability? And even then, I think there are questions about the success of the system. I would argue, in fact, that if you look at the quagmire we've talked about in terms of public policy, I think that it is a system, at least in Minnesota, that works far better than most of us ever talk about. I think to

the extent that we spend all of our time saying this doesn't work—these are all of the problems—I think we are just going more and more toward convincing elected officials of the futility of adding resources to the child protection system. Why are we going to put money into something that doesn't work? I think we need to make some decisions. Is this something that does have the ability to improve the lives of families or not? And if we think the system does not work, we're going to have a hard time convincing elected officials of anything different.

Question from Audience

I have a question about county-to-county relationships. What kind of follow up is there for the child? My understanding comes from some experience that I've had with children in my family that I've been trying to help. At one point, I was trying to deal with four counties at the same time, and each county worker that I spoke with said, "This happened in Chisago County, therefore our hands are tied. We can't do anything about that." There was Pine County that said, "That's where the children go to school, but the dad has custody and he lives in a different county." It was just a very tangled mess. What I perceived from all of this was that there was no tracking or follow up of the child—even though things had been reported repeatedly to child protection. The family kept moving, and the child was always getting left in the dust. . . . Do you have any insight on that?

Sanders

I can't speak for 87 counties—my colleagues would not be happy if I tried to do that. What I would say is, we are a state-supervised, county-administered system, and this has difficulties for the child welfare system. I know there are state people here, and I'm not criticizing how we've done it, because I think there are some advantages to what we've done . . . This is a locally run system, particularly if you look at funding. Certainly oversight comes from the state and policy comes from the state, but if you look at the funding, this is a locally funded system, and you find that it really is handled in 87 different ways. . . . That's how, as a state, we've chosen to deliver the services in this system, and I think there are advantages and disadvantages. People would say that locally elected officials are able to better understand and better respond to issues, particularly in smaller communities, and that's an advantage of having a state-supervised, county-administered system. So it is a debate that has gone on for a long time, but what you've experienced is a result of that.

Wattenberg

I do think the inter-county tensions are very serious, because amongst our poorest families, we also have the most movement across county lines. Deciding who bears the cost of services requires a good deal of negotiation. In policy debates, recommendations to centralize the child welfare system usually arise. But this recommendation is usually discarded. The Minnesota culture is very locally oriented. I do think we have to think very hard about how to manage the inter-county tensions.

After the coffee break, we will move on to debate the options for high risk adolescents.

PART THREE: Plenary Speakers

Findings from Outcome Research on Adolescents Experiencing Placement

Michael Little, Research Fellow, Chapin Hall Center for Children
Selma Dansokho, Research Associate, Chapin Hall Center for Children

Wattenberg

It is a pleasure to introduce Michael Little. He is associated with both the Dartington Social Research Unit, a research and policy center in Britain, and with Chapin Hall at the University of Chicago, a research and policy center in the USA. His research studies have won the attention of policy-makers and those who search for practice guidelines from a knowledge base of research findings. Michael Little's most recent efforts, evaluations of congregate care, are going to be very important for us.

Selma Dansokho, Michael Little's co-investigator, is a research associate and graduate of the University of Illinois in Public Administration.

We have asked our plenary speakers to speak to their findings from outcome research on children and adolescents experiencing placement.

Please note: In the U.S.A., we typically refer to congregate care as "residential placement," or "residential care." The British use "residence" for this designation.

Michael Little

We come from the Chapin Hall Center for Children at the University of Chicago and the Dartington Social Research Unit in the United Kingdom. Dartington also has offices in Spain and in Boston of the United States. Our work has applications in several places in Europe and in North America.

Our interest is two-fold. First, we're interested in how high quality evidence applies to policy and practice. The decisions—the things you're struggling with today—are potentially massive interventions in children's lives. An important part of designing interventions is to do some thorough research or evaluation to see how effective the intervention is going to be. It's not the only part of the policy process, but it's an important part of that process. And secondly, we like to produce practical exercises to help people think about evidence, in their particular context, and to use that thinking to improve interventions on behalf of vulnerable children.

We brought a few examples with us, and we're going to talk about these as we go along. The first point we want to make is 'why are we talking about the issue of residential institutions now?' Why is it suddenly a big issue in Minnesota? That's a rhetorical question. We don't have the answer to that question. It's something we want you to think about, as we proceed through the presentation. Also, how are you thinking about the question? To what extent are you approaching it as an ideological issue? Or to what extent are you using an evidence base to temper some of the ideological questions?

A lot of people ask us, "Are you for or against residences?" It's a bit like saying "are you for or against hospitals?" Generally, hospitals are good, if you need surgery, but not so helpful if you only have a headache. And that's how we'd like to approach the question of residence.

But how do you frame this question—how are you thinking about it? Are you thinking about the well being of children—of all children here in Minnesota—or about the problems of a small minority of children? To what extent does this fit into the wider spectrum of interventions, or is it just one little speck of the overall problem you're trying to think about? To what extent is the focus on the well being of children? Or is the focus more on making the systems that are in place work a little bit more efficiently. And if that happens to produce better outcomes for children, all well and good.

We tend to think about it the other way around. We're interested in getting better child development outcomes. We want the focus to be on children and how we can help them. We also encourage a focus on families from which children have come. Wherever we look in the Western world—it's not an ideological observation; it's an empirical observation—nearly all of the children we're talking about, rightly or wrongly, have families, and when we finish the intervention, that's where they return. Ninety-two percent of separated children go back to live with their relatives.

...nearly all of the children we're talking about, rightly or wrongly, have families, and when we finish the intervention, that's where they return. Ninety-two percent of separated children go back to live with their relatives.

We recently followed up children from a large residential education placement. We looked at them ten years after they left the school. Ten years on, 52% of them were living with relatives. Ninety-six percent of them were in contact with relatives. So do keep families in mind as you proceed with your discussions.

Finally, to what extent are your discussions informed by what's happening outside the State of Minnesota? To what extent are they informed by what's happening outside the United States? What models from what countries do the ones you are developing most resemble? Those are things you may want to think about, as the presentation progresses.

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The first thing we have to deal with is this question: 'What are we talking about?' How do we define "residential placement"? What is it? Selma is going to take us through a little bit of evidence that we've been working on recently around that issue here in the United States."

Selma Dansokho

. . . Michael talked a little bit about the project we are currently involved. One of the things we were interested in when we started this project was really trying to understand "residence" in context. So when we talk about children "in residence" in the United States, how many children are we talking about and in what particular sectors? So the first thing we tried to do was to map this out. We looked across administrative sectors, at education, at hospitals, mental health, juvenile justice, and child welfare. We had a list of institutions. We went to a number of national sources. We also went to a number of other sources such as the Association of American Hospitals and such organizations to try and get a count of the number of children in the different sectors. I think one thing that's important to say is that it is really hard to find data that is consistently collected at the national level, so these are estimates, but the best estimates we could get to date.

If we consider the child population in the United States to be about seventy million children, and if you look down at the number of children in the different sectors of residential care, it's clear that we're really talking about a small proportion of the total population in residence. But then if we look at the numbers and we think about the absence of a clear national policy on residence in the United States, maybe those numbers are significant.

We were also interested in not just looking at numbers, but trying to compare the use of "residence" with other countries. . . . In comparing the use of residential settings in the United States to England, we looked across several sectors: boarding schools; hospitals; mental health; juvenile justice; and child welfare (in the U.S. we refer to this as out-of-home care). The first interesting point is that residential settings appear to be used twice as much in England as in the United States. But if you look within sectors, there is over representation in the use of residence in certain sectors here compared to England. In education (boarding schools), for example, there is a much larger proportion (one to four) of children in residential schools in England as there is here. But if you look at other sectors such as hospitals, mental health, juvenile justice, and child welfare, there is a higher proportion of children in residential settings in the United States.

When you think of the characteristics of children in these settings, we note that the majority of children in these institutions are from low-income families and minority groups. This has specific implications for how people

think about residence here. We're putting more children in residence, in punitive settings here, so it's easy to imagine that people who experience this type of residential setting have a negative image of residence

Another set of questions that came to mind when we began this project was if we really want to think about residence and its implications or its contributions to child development, do we have a common framework? Do we have a common terminology that will allow us to do that? We felt there wasn't a common terminology or shared framework across sectors making it difficult to have a constructive debate or a constructive visioning about the place of residential services within the continuum of services for children in the United States.

To address these questions we developed a list of institutions across sectors that we coded for a number of characteristics that reflect the goals, nature and structure of provision. Having coded them, we used cluster analysis to group institutions that were most similar to each other. What we found was that the single most important distinguishing factor between these categories was the type of need the placement was trying to address, and not, for example, the administrative sector.

Five different categories [were used in a cluster analysis]. The first category is that set of institutions or agencies that really focus on providing high quality education. They focus on education and pay relatively little attention to students' health and behavioral needs. This category we call "boarding schools."

The second category of services or institutions are those that focus on providing an enriched educational experience, while at the same time trying to meet the psychological and behavioral needs of the children. This category we call the "residential schools."

The third category is a category of institutions or agencies that focus on cognitive or educational needs of children that require specialized care. The name we gave this category is "special schools."

The fourth are "homes for children" or services that cater to the needs of children with very complex social and psychological needs. These placements tend to be short term, tend to offer a range of services other than education, and also tend to work both with the child and with the family members.

Finally, the last category is really the category where we put all the children that we don't know what to do with any more. This category we call "treatment centers for children with strong psychological needs and behavioral deficits." These are the children with very strong psychological needs and behavioral deficits—needs and deficits have really over-shadowed their long-term developmental goals. We tend to put this group of children in secure placements, away from the world.

These are the categories we came up with. I don't know how many people here today are service providers or represent services but if you agree with these categories, it would be interesting to see where you fall within them, how you redefine yourself, and the institutions you represent.

For each of these categories of residential services (boarding schools, residential schools, special schools, home for children, and treatment centers), there are underlying questions that could be addressed. The first is, who is best placed to support the development of the child in terms of living situation, social and anti-social behavior, family and social relationships, physical and psychological health, and education. And if you think of child development over the long term, not just over a one-year or two-year period, who will do the best job of providing and catering to these needs, is it the families or the institutions?

Another set of underlying questions is "what is an appropriate time frame for residence?" Does it mean or imply that services should be provided over a longer time frame, or does it imply that services should be provided over a shorter time period? Also related to the question of who is best placed to support the child is the question, 'who should be responsible for paying for the services?' Is it the family, or is it the institution?

Michael Little

If these are reasonable definitions of the different types of residential placements that are available, it gives you a framework for comparing the numbers of children sheltered in a sector in the United States compared to other countries. What can we say about what works within these five categories? What things are we doing effectively? What can we do to make the sector work more effectively in the future? I think the first thing we'd say about that is there is a lot written about all of those types of residences—but hardly anything is available of very high quality which tells us about the value added by placing a child in a residential placement compared to some kind of other intervention.

We intend, at Chapin Hall, to try to inform the field through a program of research that Selma will talk about shortly. The second thing we'd say is that in the United Kingdom, in 1998, we published this overview of research on the effectiveness of residential care in the last three categories of Selma's taxonomy—children with educational needs; children with complex social needs; and children that are eventually placed in treatment settings. This book is evidence-based and tries to set out three mechanisms of improving policy and practice in residential care.[3]

[3] L. Archer, L. Hicks, M. Little and K. Mount, *Caring for Children Away from Home: Messages from Research*. Chichester, Wiley and Son, 1998.

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The book identifies principles of good practice that emerge from the 15 research studies that were commissioned by the Department of Health in the United Kingdom. I don't think these principles are only applicable to what happens in the United Kingdom. I think they are things that apply in residential contexts, wherever one looks.

> The conclusion is that good residential placements are those placements that are small in size, have a leader who has a clear idea about what the residential placement is trying to achieve and how to do it, and who encourages contact with family members, while respecting the fact that many residents do not wish to live at home. These sorts of placements are most likely to achieve good outcomes for children.

The book's overall approach is to use a systematic framework and a series of practice tools, which first encourage people to first find out what are the needs of children, in their particular community. Secondly, to use that evidence to set out, very explicitly, the aims and objectives for those children who are placed in residential contexts. And thirdly, then move on to take action to make the residential places—where children live—healthy contexts in which to live. The systematic procedure also encourages people to look at outcomes.

The final part of this publication is a set of 12 exercises that suggest how professionals, managers and students can translate research findings for their own work. Although all of the evidence is coming from Europe, these exercises can be applied by you, in your own local contexts, to find out to what extent these research messages are true for you, and therefore, applicable here in Minnesota.

But our goal is to try, also, to supplement these approaches with some really high quality evidence. Selma is going to talk, briefly, about three of the goals we have in mind for our work at Chapin Hall.

Selma Dansokho

I think we should specify that, for this particular body of work, our focus is on residential education. We'll be looking at and working with a number of residential settings. We recognize that the residential experience is an important intrusion into the lives of children. This is both for their short-term experience and development and also their long-term experience and development. Because of this, we believe there is a need and room for a very careful assessment of the impact of residential care in the lives of children. Even though the goals of these settings may be narrowly framed—say the goal is graduation— we are interested in looking at change in the five domains of life—living situations, family and social relationships, education, physical/psychological health, and social/anti-social behavior.

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This project has three main goals each corresponding to a strand of research. First, it is trying to measure the need and demand for residential education in the community—to get a good sense of the characteristics and the needs of children in the five domains and then to determine when residential education is a good option—and which children can benefit the most from residential education.

Second, we're interested in children's outcomes. We'll look at a number of children who are in residential education settings and follow them over time to see how they progress and how the residential experience impacts their development.

Third, we'll draw on the findings of these two strands of research, try to understand what implications these findings have for existing services, and then explore ways to improve existing or develop new programs and services. Very briefly, this is the kind of contribution we're trying to make in this particular sector.

Michael Little

It's going to take some time before those results begin to kick in. We have just begun—we're only six months into the study.

With this caveat in mind, we've got six points that we think may be relevant to you. The first thing we would say is that the broad social context in which new initiatives are mounted is terribly important. If you remember the "map" of types of placements . . . there are 14 times as many children in residence in the United States, in mental health, as there are in England. There are five times as many in juvenile justice, and one and a half times as many in the child welfare sector. Where do these children come from? They primarily come from poor communities, and there is a huge over representation of African American children. So why should these communities trust you when you come forward and say we want to provide residential services, for example in the education sector, in order to support your children? Why should those communities trust you when their experience in these sectors is overwhelmingly negative? Thinking about the social context in which new initiatives are mounted strikes us as being extremely important.

The second thing we would emphasize about the social context is that the objectives that society sets for children's services as a whole, and for residential services in particular, are—we know from research—important in achieving good outcomes. We have a simple theory set out in the publication entitled, *Making Residential Care Work*.[4] This book leads to a practice tool, *Structure, Culture, & Outcome*[5] that captures the heart of this theory, which is that good placements have a strong structure.

[4] Elizabeth Brown, Roger Bullock, Caroline Hobson and Michael Little. *Making Residential Care Work: Structure & Culture in Children's Homes*. Dartington Social Research Unit. Ashgate, 1998.

[5] Roger Bullock, Michael Little, Mary Ryan and Jo Tunnard. *Structure, Culture, & Outcome: How to Improve Residential Services for Children*. Dartington Social Research Unit, August 1999.

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A strong structure means that the internal objectives of the residential placement are congruent with the objectives that the wider society has for that placement. The "wider society" means the community from which the children come—it means legislators and policymakers: and it means practitioners. If you get congruence around the objectives, you tend to get what we call a healthy culture in the residential placement.

There are all kinds of arguments as to how you define "culture." We define it very simply. We say we take common events in children's lives—a parent visiting; child refusing to go to school; a child who is sick in the morning—and then we ask people in the residential placement how they will respond to that event. If they respond in a consistent way and they are all doing the same thing, we call that a "cultural response" because it's a consistent response across the organization. Of course that could be negative or it could be positive. If the child says, "I'm not going to go to school," and everybody says they're going to strike the child as a response, that's clearly a negative culture. But hopefully we're looking for a positive culture. Where you have consistent objectives, you tend to get a healthy culture. And where you get a healthy culture, you tend to get good outcomes for the placement. When you get good outcomes for the home, you tend to get better outcomes for the children, as measured in child development terms. This publication is an attempt to provide people with a methodology to think about that. But really it's about getting the community, as a whole, to think about what it is we want to achieve for our residential placements.

The third thing we'll say about residential contexts is that it is useful to think about whose children are we serving when we talk about residential services. Our feeling is that there is a tendency in the United States, when talking about children in these contexts, to talk about other people's children. We're talking about children from ethnic minorities. We're talking about poor children. Now everything is not wonderful in Europe, but in that continent, there is a greater tendency to think that all children are our children. When things go wrong, we feel we are responsible for them.

When we think about residence, we are thinking about placements where we would be happy to place our own children, as well as place children from other contexts. That's a good way of thinking a little bit about the social context in which residence is provided.

To continue with the theme, there are relevant lessons from other countries on which to build. There has been a decline, in recent years, except in China, in the use of residential placement. That is not an ideological point. It is a fact. For example, if you look in England where the population is 55

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million, there are about 11.3 million children. The numbers in residence have gone down by 50% over the thirty-year period—1970 to 2000—from 235,000 to 120,000. There are no children that we know of under the age of 9 years who are in residential placements in the United Kingdom. And child welfare placements in residence are a very short stay. Children are in respite care for a period of about six to nine weeks, at most. So the nature of residence elsewhere in the world is changing. The U.S. seems to be moving in a different direction. I can't say whether it's right or wrong. The context is different here, but it is worth bearing in mind what is happening elsewhere.

That brings us to thinking about the way in which these developments have come about. Sometimes they are the result of general reform. For example, in the 1970's, research from Dartington led to the discontinuation in England of the training school system for juvenile delinquents. And that came about for two reasons. One was because the research showed that the training schools were ineffective in achieving their objectives. They did not reduce juvenile delinquency. The second was from a policy point of view, and this may be relevant here. The policymakers wanted to get rid of the sector because the people who ran the sector were too powerful. They focused on the institutions and not on the children, and there was very little that the government could do to change that. So the policy makers liked the research, but for very specific reasons.

The third aspect I'd like you to think about, when you're thinking about the outside world, is that much of the reform taking place in other countries comes as a result of changes in children's services as a whole. Residential services are simply one part, as Selma says, of a wider set of children's services. When you start to do that, you start to get away from what we call "supply-led" systems which are systems where "if you build the beds, they are used."

Europe—and again everything isn't rosy there—has adopted a "needs-led" system. In England, the Children's Act of 1989 requires every single community to look at all of the children in the community and define which of those children are in need, and then to put in place a set of services to meet their needs. Out of 150 local authorities, only one has managed to do without residence. But the decline in residential services has taken place in the context of a wider range of children's services reform. The continuum of services is now the concept that is intended to meet the needs of children.

This tends to lead to a concentration, at the national level, on the needs of children. One of the pieces of work I finished in 1999 for the government was a study where we tried to establish the need for secure

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accommodation among the most disturbed children in England. We determined a need for 3,000 beds, and that is what was provided. The supply was set by evidence and not by a policy process.

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This is a methodology that we've developed from the Dartington research program. It's called, *Matching Needs and Services.*[6] It was first produced in 1995 and is now in its third edition. It is used by half of all the local authorities in all of England and by 15 countries outside of the United Kingdom. It has a series of simple principles. It gets people like you, sitting in this room, to sit around a table and to look at all of the cases that you dealt with in the previous year and to use that evidence to think about what you will be doing in the following year. It gets you to think about cases. It does not get you to think about the ideological issues. It gets you to think about what you will do in order to achieve better outcomes for children. And the children who came to your door last year are going to be very similar to the children who come to your door this year.

The principles are to look at the whole child. We look at living situations, family and social relationships, education/employment, physical/psychological health, and social/antisocial behavior because we're dealing with the whole child. We're not dealing with a bit of the child. We get people to do that quickly because you do not have lots and lots of time to wait for research to inform this process. So it should be possible to complete the whole process in two to four weeks, depending upon the size of the area you're trying to cover. And it gets you to think about outcomes and objectives for the sorts of services that you want to provide. It will lead to new types of residential service, and it will provide types of service that you probably haven't conceived of before.

Matching Needs and Services provides very different types of residential services designed to meet children's needs. In these instances residence isn't there to do everything, it's there to do a specific part of the job at a specific moment in the child's development. This is the continuum of children's services that I mentioned earlier on.

I would like to make reference to a book half-written by a child and half written by researchers.[7] The child is called Siobhan Kelly . . . In this book we summarize some of the evidence. It shows Siobhan was in a psychotherapeutic community for five and a half years . . . That is a substantial intervention, but it's only a third of her life . . . She also had to go to a series of foster placements, as part of her recovery. She had to have good quality family contact as part of her recovery. She had to have lots of support with her behavior provided by

[6] *Matching Needs and Services: The Audit and Planning of Provision for Children Looked After by Local Authorities.* Dartington Social Research Unit in conjunction with the Support Force for Children's Residential Care. 1995

[7] Michael Little and Siobhan Kelly, *A Life Without Problems?: The Achievements of a Therapeutic Community.* Dartington Social Research Unit, Ashgate, 1995.

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psychotherapists and counselors outside of the residential placement. She went to school, but she didn't go to school in the residential placement. She went to a mainstream school because, in England, we have fairly strong legislation against social exclusion. The emphasis is on keeping children in the mainstream. This was a child who had experienced severe sexual abuse. She had a series of placements in hospital because of overdoses when she was 12 and 13. She had another residential placement, but the psychotherapeutic community, which by my reckoning saved this girl's life, was still only a third of the overall intervention that led to extremely good outcomes in adulthood.

If you take a "needs-led" approach, you immediately become interested in outcomes for children and not just what is best for the system. How do you do this? One way is to chart the chains of negative effects in children's lives that require interventions in order to break these negative effects. This shows how different kinds of interventions, including community responses, separation from the home, and residence, can break those negative effects. We really want people to think about cumulative effects on the child when they're putting together services and not just think about what is good for the system.

Once you take a child development perspective, you begin to isolate groups of children who could certainly benefit from residential interventions, alongside other interventions. You also begin to identify certain groups of children who should never receive a residential intervention. There are some children whose behavior demands some kind of secure treatment context to protect them and possibly others. As a rule of thumb, and based on what we know about effective services for children in Europe and North America, for every 200 separated children, you will find one child who needs to be in a secure therapeutic context, in order to meet the child's needs, so one out of 200. You can do the math to see whether you get a similar type of equation. If you've got more, you may have too many provisions, and if you've got less, you may need some more.

We know from research that those interventions work when there is: good education; behavior modification to change the child's behavior; psychotherapeutic intervention in order to give the child some insight into the problems that led to their difficulties in the first place; some kind of family therapy to reintegrate the child into the family; and some social work to reintegrate the child into the community, so they've got some chance of getting back into school, back into work, and operating as an ordinary citizen in society. Not one of these things alone, but these things in combination.

Another group that could benefit are some children in residential education contexts. In our current study, we're looking at outcomes for poor children.

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One of our findings is that the children from poor backgrounds who really benefit are brighter children, with a higher IQ, and on the whole, they are older. The younger children appear less likely to benefit. These are children with relatively few social needs. They tend to come from relatively stable family contexts, compared to the fluidity we find in many child welfare contexts.

So it seems that five factors in combination—bright children, older children, relatively few social needs, relatively stable family backgrounds, equilibrium in expectations between family members—best predict who will get something out of residential education.

I don't know if they're the children you are thinking about when you are considering a residential education context, here in Minnesota.

What doesn't work? I think there is a consensus in the literature now, that younger children, generally, seldom get much from residential environments, and they can be damaged. There's no consensus about what 'young' means. In the European Union, we have very few children under the age of 9 as I mentioned before and hardly any between the ages of 9 and 12 years in residential environments. There are lots of residential placements that I've seen around the world, where I would place my own children. But as a psychologist I really wouldn't consider placing my own children in any residential placement until they were 12 years of age.

A second group that does not benefit are children with mild behavior problems. Children with mild behavior problems generally deteriorate in residential placement. Again, that is not an ideological statement; it is an empirical statement. If you put children with behavior problems together, their behavior, on the whole, tends to deteriorate. It creates all kinds of new problems, and the emphasis becomes on modifying problems caused by the placement and not focusing on the problems that led to the child being placed in the first place.

In closing, we'd say, do not deal with this issue as an ideological issue.

Every effective children's services system has some residential provision. The questions are, "how much?," "for whom?," and "what type?" Secondly, spend a little time collecting information to try to answer those questions—how much, for whom and what type? The methods mentioned today, *Matching Needs and Services, Structure, Culture and Outcomes* are one way of going about this. Think a little bit more about the needs of children, and use that as the basis for your deliberations, not ideological observations.

Every effective children's services system has some residential provision. The questions are, "how much?," "for whom?," and "what type?"...Think a little bit more about the needs of children, and use that as the basis for your deliberations, not ideological observations.

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Thirdly, try to get out of your respective camps, get around the same table, and talk about what you would do to meet the needs of real cases here in Minnesota. Don't just talk about whether residential services are a "good" or a "bad" thing, because the discussion will never end. You won't get any agreement. Sit around the table and talk about what you would do in order to meet the needs of either typical groups of children that you're faced with, or of individual cases. You'll be amazed by how quickly very disparate perspectives come together to provide some agreement on what ought to be provided.

Finally, I would encourage a little bit of humility. We don't really know very much about outcomes for children in residential settings. In this room, there is probably 60% of the expertise in this field in the state—a huge amount of expertise about children, about vulnerable children. At Chapin Hall, we are devoting five years to study this issue. In five years time, we will have only scratched the surface.

So let's have some humility about how we go about our proposals.

Thank you very much.

PART FOUR: Sharpening the Debate

Mary Ford, MSW, LICSW
Research Associate, North American Council on Adoptable children (NACAC)

Douglas Goke, LICSW
Dean, Student Life, Covenant Academy

Introduction—Wattenberg

This is a good time to have brief presentations from Douglas Goke, who is directing a residential education academy, and Mary Ford, an advocate for family-based placements for children who cannot remain with their birth families.

Mary Ford

I'm from the North American Council on Adoptable Children where I am a research associate. I am also a part of and a founding member of the Family-Based Care Coalition, based here in Minnesota. The Family-Based Care Coalition represents local, state, and national child welfare organizations and individuals dedicated to the understanding that every child deserves a loving family. Two points: The North American Council on Adoptable Children (NACAC) is an organization that advocates on behalf of foster children who are moving from foster care into permanent families, adoptive families, or the care of relatives. Secondly, NACAC and the Family-Based Care Coalition have been strong opponents of the return to orphanages in Minnesota. "Orphanage" is a strong word and not all residential educational academies can be lumped into that category.

However, as Professor Little pointed out, unfortunately here in the United States, sometimes we do dichotomize into incredibly polar opposite camps. On this issue, unfortunately in Minnesota, we have split quite decidedly. NACAC and the Family Based Care Coalition opposed the recent development of some of the facilities in Minnesota, and I'm going to be very specific, because my role is to sharpen the debate. There are four either proposed or already existing residential academies, sometimes known as orphanages in Minnesota. The first two exist. Synergy Academy is on the North side of Minneapolis and currently serves fewer than a half dozen residents. That facility has been open for about a year. Doug Goke's facility, Covenant Academy in Fairbault, has been open for a short time and has residents. Those two are the existing facilities. Two are proposed. One is Mary Jo

Copeland's facility, which is proposed now for the suburb of Chaska, west of Minneapolis.[1] As many of you know, this is the facility that is driving this incredible debate. At this point, the Copeland facility, which would be called the Gift of Mary Children's Home, would house 200 foster children ages 4-18, would include an on-site school, would not provide a treatment program, and would not serve children with "troubles." The other proposed facility, Minnesota Valley Academy, is perhaps to be located at Fort Snelling. This facility would house more than 500 disadvantaged and foster children between the ages of ten and eighteen. The program would be educational, not therapeutic.

I would least wish to be debating Doug Goke from Covenant Academy, because his program begins to meet the need of some of the youths David Sanders described to us earlier. Their need is very clear. There are 80-90 mostly older children in Hennepin County who have a long history of stays in the child welfare system, of trauma, of abuse, and of multiple placements. For this group, there is a desperate need for placement alternatives, which Covenant begins to meet. Three out of the four facilities that I mentioned do nothing to meet the needs of these older children. They are ideological crusades, in large part. Some of them truly have, as their mission, residential education with poor disadvantaged children who would be involved voluntarily. But then there is the discovery that there is no money to pay for those kinds of expensive institutional placements, and then the foster care population is looked at as possibly a group of children who perhaps could live in these facilities. We as child advocates are raising red flags and saying that we don't want our limited, meager foster care dollars used for expensive placements with dubious results and long stays for foster children.

I would say that we are polarized, and it is not completely constructive. Gail Chang Bohr earlier posed the question, "How do we support our foster parents?" The child she interviewed in California said, "I just want my foster parents to hang in there with me." How do we support foster parents so that they can "hang in there" with their difficult foster children? Our organization and the coalition that we're a part of are strong advocates for increased support for foster, adoptive, and relative care. And I would argue that those families need to be supported, supervised, and trained, just as treatment foster families are. And yet those kinds of supports and training are in short supply for that type of family.

Secondly, Gail Chang Bohr said that we have to remind ourselves that it's nothing that the child did. One vignette that I remember—a child who was in an institution for a long time—is an eight-year-old boy who was placed in a congregate care facility. He spent the next three months or so looking out the window, waiting to see if a car that he recognized would drive up, pick him up, and take him away. It was not explained to him why

[1] **Editorial Note**: While two other communities turned down the request for rezoning, Eagan's City Council, on June 4th, approved Mary Jo Copeland's zoning change request and her preliminary orphanage proposal for *Gift of Mary Children's Home*.

he was there. It was not explained to him how long he would be there. And he assumed that it was his fault—that he did something to be put in this place. Children in large institutions, young children particularly (but we can't exclude older children in this either), wonder what they did to deserve to be in a facility, where they no longer have parents.

Finally, I challenge Minnesota. Our work on the Adoption and Safe Families Act is half done. The pendulum has swung, wildly, in another direction. I would argue that we could combine family preservation, family reunification, and adoption or legal care by relatives. I would argue that we can combine genuine family reunification efforts and planning for a permanency alternative, for the sake of the child. We shouldn't have to land on one side or the other of this debate. For the sake of the child, so that we don't have to discuss in seven years which orphanage or residential facility the child should go to, let's focus on the goals of the Adoption and Safe Families Act and not be pitted against one another.

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Doug Goke

Mary and I have sat on tables like this a couple of times . . . A comment to Rich from one white guy to another white guy, the way to get along with kids is to grow a beard, do a ponytail, and drive a school bus. You do get accepted at that point [laughter].

On a serious side, we are really gifted to have some pretty good data. The Minnesota Council of Child Caring Agencies has 16 years of good outcome data. Jerry Beker and Doug Magnuson from the University of Minnesota, Center for Youth Development, back in '96, did a book called *Residential Education as an Option for At-Risk Youth.*[9] The pendulum swings every seven years here in Minnesota . . . The Wingspan Group from Wisconsin has developed a good position paper . . . "Should Residential Care Ever Be Considered as a Permanent Option for a Child or Youth?" There is quite a bit of literature out there. We have heard today about standards and best practices in England. We have some of those in the U.S. . . . They include providing a safe, abuse-free environment, demonstrating current concern for happiness and satisfaction . . . promoting family identification, fostering cultural and community identification, and providing the least restrictive care that is in the best interest of each child. And here are some standards that I really like: provide children with the opportunity to learn an abundance of skills with their physical, social, emotional, education, moral and spiritual development. The big one, of course, is provide for educational progress for each youth. I was selected to present today because

[9] Beker, J. & Magnuson, D. (Eds.) (1996). *Residential Education as an Option for At Risk Youth.* Binghamton, NY: The Haworth Press.

I have an academy going. After 14 governmental regulations, licensures, standards, etc., we opened right around May 1st. I like the issue presented today, and I would phrase it this way, "How can we best achieve our collective aspiration of providing all children and youth with a decent life, and to the extent possible—I think a key word—with permanency?" I'll get to that, but we at the Covenant Academy want to be an academy, a place where students live and receive their education. We're not an orphanage, not an institution, not a congregate care facility, and there are other worse words yet that we've been grouped with. We're a little prickly about being called anything other than an educational program.

Why were we established? The Academy was established to meet the needs of a small number of students who have had difficult living situations, which prevent them from fulfilling their goal of earning a high school diploma and passing the State graduation standards. . . . We seek as applicants disadvantaged, at-risk youth whose living environments have prevented them from achieving their potential.

> The Academy is an excellent solution for youth who could succeed academically, if their living situation was a bit more stable. Here are some of their characteristics: they have had repeated unsuccessful, out-of-home placements; they cannot maintain academic continuity, because they have difficulty with their living situation; they perform poorly in school, but show academic potential; they have successfully completed residential placement for emotional, behavioral or substance abuse issues. Those who successfully complete those programs make good candidates for the academy.

Students may have had truancy issues, may need ongoing help for adjustment, behavioral or relationship issues, and may be one or more grade levels behind academically. . . .

I've answered the questions "who" and "why." But to return to the subject of the afternoon's agenda, "Debating the Options for Adolescents At Risk," here are some quick, overriding points. The issues really are complex, and I believe we need an array of services or programs. We need to expand our thinking a bit more about what permanency means. There are some children who do best in long-term residential placements. There is strong evidence, maybe not empirical evidence, but there is strong evidence that residential group care works well for some students. . . . In Minnesota—I would call it public policy—residential education for at-risk students has been established. The legislature passed a bill with funding and the governor signed it, so it's law, and we're established.[10] Residential education has been utilized and has been available for privileged and non-privileged kids in the

[10] Governor Carlson Announces More Residential Academies. *Capitol Roundup*, December 11, 1998.

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U.S.A. and elsewhere—Israel in particular[11] and in Africa, Europe, Latin America and the U.S., primarily to help youngsters earn a high school diploma. If we are a society concerned about at-risk youth earning a high school diploma, then residential education should be part of the continuum. On the other end of the continuum, we need to find funding for all of those kids that need mental health services and are not getting them. I particularly singled out a particular group that I've worked with for over 30 years, kids that have needed residential treatment. . . .

If we are a society concerned about at-risk youth earning a high school diploma, then residential education should be part of the continuum. On the other end of the continuum, we need to find funding for all of those kids that need mental health services and are not getting them.

Comment by Arthur Higginbotham, sponsor of the Minnesota Valley Academy

I was late for the conference today because we had a meeting with the bonding committee of the Minnesota Senate seeking funds for Fort Snelling. We do have approval from the DNR to use the Fort Snelling site. Minnesota Valley is a little different than the model Doug has been talking about. In that model, the focus is on somewhat older children. We're proposing that we follow the role model of Gerard College and the Milton Hershey School in Pennsylvania. Those institutions, which are both over 100 years old, served 2,100 children in a state with a child population of three million, about three times the size of Minnesota. If we take the same ratio as Pennsylvania, Minnesota has an opportunity for 600 Minnesota children who could benefit from a residential and environmental education. I would appeal, as I think Michael Little did, that we take the argument off the ideological plane and bring it down to an outcome-based plane. I would just like to say that Gerard and Hershey have done a wonderful job. I graduated from Gerard in 1954. I was a poor, white, male orphan. I am one of five graduates from Hershey and Gerard who live in Minnesota. I went on to Amherst College and MIT, came to Minnesota to work for 3M and got to be a group Vice President, before I retired five years ago. When Governor Carlson's proposal came through, George Cuningham, who is the other Gerard graduate here, and who heads up an architectural firm of 240 architects, said, "We owe a debt for what we got from Gerard College. Let's start to do something here in Minnesota." There are three graduates from the Milton Hershey School—Joe Sensor, who played for the Vikings and now is a restaurateur, Phil Norris, who is a professor at Northwestern College teaching music, and Nick Nissley, who is a professor of management at St. Thomas University. In terms of outcomes, that's five for five.

Could I make just one more statement? I think we need to give a residential academy an opportunity here in Minnesota. Thank you.

[11] Beker, J. & Magnuson, D. (1996). Residential education as an option for at risk youth: Learning from the Israeli experience. *Residential Treatment for Children and Youth*, 13(3), 117-124.

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Higginbotham (Responding to the question: For which kids and how will this residential academy be financed?)
Disadvantaged children, who are voluntarily placed by parents or guardians, who maintain a close proximity to their children, while they're in that institution. Over half of our prospective students will come from the area around Fort Snelling.

We will pay for it through private funding. We are not seeking any county funds for children who are currently in foster care.

Higginbotham (Responding to the comment that $30,000 per year is a suggested cost per child in a residential setting, and will private funding manage the amount needed for 500 children.)
The cost is not $30,000 per year. A study of 12 schools run by the committee on residential education, including Gerard and Hershey, estimate $24,000, including educational costs. The educational costs would be paid by the student per pupil aid formula, so it is $17,000 per student. We believe there are enough compassionate people in Minnesota who feel this underserved population can create bright citizens for this state, and that it should be an option that's to be pursued.

Wattenberg
Doug, I think you had criteria that you used for entrance into your academy?

Doug Goke
I would call it the "application" process. We're trying to get away from the corrections terminology and mental health terminology and shift to an education terminology. So we use the 'application' process. The student needs to fill out a minimum 150-word essay as to why he or she would like to attend the academy and what the goals would be. In addition, a competent, caring adult, hopefully the parent, or a relative also needs to fill out an essay: why the academy could meet the goals of the student, and how they are going to support the student. The student needs to go to someone associated with education and get them to fill out an essay as to why the youngster could benefit and how they would help support the youngster at the academy. So that's the application process, and you could refer to it as criteria.

Wattenberg
Michael or Selma, do you have any observations to make about these developments? And perhaps you could comment on Mary Ford's point of view, which maintains that enriching our family foster care and therapeutic foster

care systems are important features of a continuum of care. You were saying do not use one against the other but consider the continuum of services. Any comments on developments in Minnesota?

Selma Dansokho (Responding to Higginbotham)
Which group though do you hope to serve? Eventually you hope to serve children as young as five. When I look through your proposal, I do see that in your material.

Higginbotham
Our proposal was to start with fourth grade and to work down to first graders, as Gerard and Hershey have done. One last comment that I forgot to make, Gerard is now 95% African American. That's the population that needs to be served. One hundred percent of those children went to college last year.

Michael Little
Yes, I do think that's almost right, actually. The attrition rates in those sorts of places are around 55%, so 85% of those that graduate go on to university, usually a two-year college. But only 45% of those coming in, graduate. And the question is, what is the value added?

Would those children who graduated have gone onto university anyway? That's the bit that we don't know. There may be a need for your kind of academy here in Minnesota, if one doesn't currently exist—an academy for poor children, where the parents and the child want the child to go to a residential education placement, where the child is probably above average intelligence, where there are relatively few social needs, and where there is relative stability in the family background. I doubt very much, in fact I would be very, very surprised, that there's a need for 600 places.

One of the things that Hershey and Gerard, themselves, are very invested in, at the moment, is trying to find out what the need is for that kind of provision. . . . If you're going to raise $17,000 per child, for that many children, I would just invest maybe 5% of that, before you start, in finding out what the need is. And if you were a business person, that's the first thing you would do . . . There is a need, but I don't think it's of that volume. Probably you should go for older children. You'll find it very difficult to get the fourth graders through to graduation . . . You'll get graduation rates around 55%, if you start at fourth grade. It will go higher if you move the age range up.

Nobody could dispute the need for better provision for foster care and for children in the foster care system and better adoption resources. . . .

There is a desperate need for improved provision in that area. . . . And that probably means effective financial welfare systems in place, where a lot of these problems are emerging from. And you'll find it very difficult. You've got poor preventative services. The numbers of children that you're looking after in this country reflects that. The rate of children looked after in England is four times lower than it is in this country. We have poverty. It's not the level of poverty that you have, but we have very, very much fewer children looked after away from home because, we have better preventative services. . . .

In terms of dealing with adjudicated children, the idea of providing them with an educational experience, which is equal to that available to other children of the community, has to be applauded. But one would also have to say that the more social needs that you have and the more behavioral problems that you have for children in group settings, the more difficult it will be to achieve good educational outcomes. And if the graduation rate from these sorts of places is only 45%, you're going to find it's much lower in your sort of context. So it's an admirable initiative, but there's very little evidence, from around the world, that shows that it can be effective. So my response would be let's get some evidence. Let's find out if it is effective, and let's do that in a systematic way, which is about value added.

I just want to make one final point. We're talking about different populations . . . and there is huge confusion on this point.

Wayman

One of my concerns, as a youth advocate here in Minnesota, is that we're getting involved in this debate on larger residential placement settings for youth, . . . when there's not enough money out there to do evaluation and research. The Department of Human Services . . . licenses these facilities, but they are so short-staffed that they only come out once every three years to look at these facilities. I know from creating a program that it seems as if there's too much regulation. But as a child advocate, I'm worried about the global well-being of a child, and how to protect children in these placements, even if it is voluntary. What would you suggest, as a researcher, if the reality is that there's no money to look at evaluation and research, and we don't have very good oversight over these facilities? What can we do, as a community, to protect the well-being of the children? We're trying to meet the basic needs of the youth. How do we look at protecting them in these placements?

...as a child advocate, I'm worried about the global well-being of a child, and how to protect children in these placements, even if it is voluntary. ...What can we do, as a community, to protect the well-being of the children?

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Michael Little

It strikes me there is this sort of economic imperative here for legislators. I think Hershey and Gerard are good models. They are investing large amounts of money in evaluation, because they want to be relevant in ten or twenty year's time. And if they don't do that, they will be irrelevant. People won't use them. They have more money to invest in services, but they want to find out what kind of services. The kind of services that Mr. Hershey created in 1909 are not relevant today . . . The world has moved on. Hershey was for white, orphan boys. There are few true orphans. . . . It seems to me there is an imperative for the legislators. In England, in the health field, we provide one percent of all expenditures for research and evaluation. The Ford Motor Company allocates 17% on research and evaluation, not because they want to be nice to us, but because they want to sell cars. They want to be relevant to the society in which we live.

The second issue is about regulation. I think that is very important. I think that's an area, in Europe, where we haven't made a very good try at it. There is lots of regulation in Europe.

It doesn't matter how much regulation you have, you cannot eradicate the abuses that can take place in group settings. And group settings are particularly susceptible to abuse by adults on children and children on children. You cannot eradicate that by regulation alone. You need to be able to do that by good training, by openness to the outside world, and a preparedness to listen to children, when they make accusations. In the past we tended not to take very much notice of them, but now we know how unwise that can be.

Goke (Responding to Michael Little's information that England's graduation rate is 61%)

Sixty-one percent. I understood it was quite a bit higher than that. . . . In Minnesota, we're seeing the graduation rate drop. I think that's one of the reasons that residential education becomes more of an issue right now, because the principal task of youth is to earn a high school diploma or go beyond. . . . I think education really plays a significant role in poverty. There is a need for residential education programs.

Michael Little

. . . In England and here we are obsessed by standards, and in some respects, rightly so. The children we're talking about today ought to have the same opportunities we want for our own children. We want our children to do well in school. But in this context, I always think of Caravaggio. Caravaggio

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was a grade one juvenile delinquent. He is, without question, one of the world's five greatest painters of all time. Leonardo da Vinci was another one. If they'd been alive today, we would have locked them up in a secure unit, without a paintbrush. And if they got out of the secure unit, they would have been in a school and they would have been pushed in England to get five-grade A-C s, and they would never have seen a paintbrush. So there are other ways of expressing intelligence other than through the standards.

Joe Kroll, Executive Director, North American Council on Adoptable Children

I am an ideologue. I would just like to argue that each of us write Commissioner O'Keefe and ask that he convene a task force of folks who have different points of view to discuss these proposals. From this ideologue's point of view, the most frustrating thing are the proposals that are before us from the different groups. . . . they are moving targets. In spite of the comments made today, I have a real fear that the target population are the children in foster care, for whom we really should not be directing these programs. I think that we all need to write Commissioner O'Keefe and say it's your responsibility to bring the folks to the table to talk about these issues and for the State to provide some leadership. Even though it's a county administered state, the State needs to have some leadership on this issue, because the academy movement was a State legislative effort.

With this final comment from the audience asking for state leadership in formulating a discussion on the issues opened up in today's exchange, the formal part of the forum came to a close.

Final Comments

Esther Wattenberg

The context for this forum was shaped by a puzzling question articulated by Michael Little: Why do we have this clamor in the U.S.A. for reviving a 19th Century phenomenon, "the orphanage," at a time when large-scale residential placements are declining around the world, and actually disappearing in most countries?

In responding to this question, David Sanders reminded the audience that our insistent focus on the problems in the child welfare system has led to a crisis of confidence—a sense that the current system is a failure. Further, the negative political aura that surrounds the child welfare system is reinforced by the ideological stance of many political figures that adolescents and their problems are a private matter, the responsibility of the family, not the government and public policy. Moreover, Gail Chang Bohr placed the reluctance to mount a vigorous concern with the plight of older children on society's ambivalence toward adolescents. They are often identified in our culture as restless, troublesome, intractable, and threatening to domestic tranquility.

Several participants underlined the political and public indifference, highlighted by Richard Wayman, to the plight of homeless, runaway, maltreated adolescents. Yet, Suzanne Guttsen reminded us that the issue has not been entirely dismissed. In fact a study was commissioned by the Department of Human Services to formulate recommendations for homeless and runaway youth.

The debate on how to respond was sharpened by observations that educational academies should not be dismissed as options in our continuum of care framework.

Audience comments reminded the forum that underlying the policy concerns, serious practice issues confront county front-line workers dealing with the turbulence of adolescent life. "Families keep moving and children are always getting left in the dust." This observation exposed the inter-county issues of cost of care and availability of resources in small, rural counties. Other observations brought attention to the demanding responsibilities of day-to-day work "in the trenches." Sue Serbus, Nicollet County, summed up the daunting agenda for front-line workers this way: "We need to do the challenging but also rewarding family work to prevent placements. We need to continually assess safety (use a standardized checklist such as SDM),

check out the family environment (home-visiting), brainstorm informal and flexible options (mediation), discuss and empower family members on back-up plans and safety plans (family group conferencing), and provide resources and services (advocacy). And for case managers, they need to check out their work with their treatment or Unit team and Supervisor (clinical and case consultation)."

Michael Little and Selma Dansokho, two highly respected scholar/researchers in residential care of children, framed this forum's debate on the options, with a clear set of directions for paying attention to adolescents at risk.

They clearly articulated instructions for drawing the map for the future: avoid the contentious debates that are clearly ideological in nature; and begin at the beginning. What do adolescents at risk need? Needs should be set by evidence.

A final comment from Michael Little encourages a stance of humility, given our limited knowledge of outcomes for all of our interventions. This is a clear call for increased research and study.

Powerpoint Presentation Presented 12/5/01
Cowles Auditorium, Hubert H. Humphrey Center

Debating the Options for Adolescents at Risk

Can We Safeguard the Interests of Endangered Adolescents?

The Best Interests of the Child

- The policy of the state of Minnesota is to ensure that the child's best interests are met by requiring an individualized determination of the needs of the child and of how the selected placement will serve the needs of the child being placed. The authorized child-placing agency shall place a child, released by court order or by voluntary release by the parent or parents, in a family foster home selected by considering placement with relatives and important friends in the following order: (1) with an individual who is related to the child by blood, marriage, or adoption; or (2) with an individual who is an important friend with whom the child has resided or had significant contact.

MN Statute 260.212 sub. 2.a, 2001

Licensing Rules

- Rule 5: Residential Treatment Centers
  Most restrictive, high level of specialized care, staffed with clinical personnel and medical professionals. Minn. Rules parts 9545.0905 to 9545.1125.

- Rule 8: Group Homes
  Less restrictive, medium level of specialized care, staffed with minimal clinical personnel and medical professionals. Minn. Rules parts 9545.1400 to 9545.1480

- Rule 1: Foster Homes (Operated Group & Family)
  Least restrictive, low level of specialized care, staffed with no clinical personnel or medical professionals. Minn. Rules parts 9545.0010 to 9545.0260.

Homeless Youth

- On any given night in Minnesota, an estimated 660 unaccompanied youth age 10-17 are without permanent shelter.

- More than one-half are persons of color; African Americans and Native American are particularly over represented.

- Two-thirds of all homeless youth (67%) have experienced some type of out-of-home placement.

- Forty-seven percent have been physically abused.

Wilder Foundation Survey of Unaccompanied Youth, Oct. 2000.

Youth Served in State Supported Shelter Care

In 2000...

- DHS and DCFL provided grant funding for 60 shelter beds that could be directly accessed by youth 16-21.Three shelters in the metro served 320 youth.A coalition of 25 private agencies located throughout Minnesota served 2,572 youth in short-term shelter care, 80% were age 12-18.

Data provided by Department of Human Services and Minnesota Council of Child Caring Agencies.

Youth Served in State Supported Transitional Housing Programs

- In 2000, DHS & DCFL funded twenty transitional housing programs for youth age16-21.
- In 2001, at least 500 youth were served in transitional housing programs.

Data provided by Department of Human Services, Nov. 2001.

Adolescents in Out-of-home Care State Data

In 2000...

- Of the nearly, 18,840 children in out-of-home care, about 50% (9,420) were youth age 14-18.
- Children of color were over represented in the out-of-home placement system compared to the number of youth in this age group in the population.
- Fifty-eight percent were Caucasian, 19% were African American, 9% American Indian, 2% were Asian, 9% were two or more races and 3% were heritage not known.
- Of the 18,840 children in out-of-home care 53% were from the seven-county metro area and the remaining 47% were from the 80 non-metro counties.

To date...

- 1,479 children are under state guardianship, of these 40% (585) are youth age 12-17.
- 36% (534) of the 1,479 children are in adoptive placement, of these 8% (114) are youth age 12-17.

Data provided by Department of Human Services, Dec. 2001

Adolescents in the Child Welfare System: Hennepin County

In 2000...

- Out of 5,686 investigations 2,232 families with at least 1 child between 12-17 had an assessment completed.
- Of those 21% (485) were opened for case management.

In 2000...

- On Dec. 31, Hennepin County had 1,130 youth age 12-17 in out-of-home care.
- 83 (7%) of these youth are wards of the state.
- 462 (42%) are in long-term foster care.
- Of the 1,130 adolescents age 12-17 in placement almost half, (620) suffered a disability.
- A majority of these children were assessed as emotionally or severely emotionally disturbed.

Data provided by Hennepin County Children, Families & Adult Services Department.

Services for Adolescents

- Over 2,000 youth accessed two drop-in centers, one in St. Paul and the other in Minneapolis.
- StreetWorks provided intensive support services to 493 youth after 16,000 new youth contacts.
- The Family and Children's Services, DHS reported 1,685 youth age 16 and older used Chafee funds in preparation for independent living.
- Statewide 29% of these youth are children of color.
- In Hennepin 70% of these youth are children of color.

Mental Health Services: Children Age 9-17

- The Minnesota estimate of children, age 9-17 who can be assessed Severely Emotionally Disturbed (SED) is 27,239 for the year 2000.

- Less than half (11,393) received mental health services.

- In 1999, mental health services were provided in the following settings:
    - Day treatment...1,759
    - Out patient treatment...11,412
    - Residential treatment centers...1,352

- Seventy-four beds are available in two Regional Treatment centers for adolescent patients with an average daily census of 41.

Financial data:

- Of the $144,700,000 spent for children's mental health services, the federal share was 30.4%, the state share was 26.6% and the local share was 40%.

- The cost of residential treatment in 1999 (Rule 5) was approximately, 29% of the cost of all publicly-funded service.

1999 Service Utilization Tables for Children with Emotional Disturbances, DHS.

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